

<b>STATE OF MICHIGAN</b> <b>PROBATE COURT</b> <b>COUNTY</b> <b>CIRCUIT COURT - FAMILY DIVISION</b>	<b>NOTICE OF HEARING</b>	<b>FILE NO.</b>
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In the matter of \_\_\_\_\_

**TAKE NOTICE:** A hearing will be held on \_\_\_\_\_ at \_\_\_\_\_ m.,  
Date Time  
 at \_\_\_\_\_ before Judge \_\_\_\_\_  
Location Bar no.  
 for the following purpose(s): state the nature of the hearing

If you require special accommodations to use the court because of a disability, or if you require a foreign language interpreter to help you fully participate in court proceedings, please contact the court immediately to make arrangements.

_____		_____	
<small>Date</small>		<small>Date</small>	
_____		_____	
<small>Attorney name</small>	<small>Bar no.</small>	<small>Petitioner name</small>	
_____		_____	
<small>Address</small>		<small>Address</small>	
_____		_____	
<small>City, state, zip</small>	<small>Telephone no.</small>	<small>City, state, zip</small>	<small>Telephone no.</small>

The law provides that you should be notified of this hearing. Unless the check box below is marked, you are not required to attend the hearing, but it is your privilege to do so.

☐ You are required to attend this hearing.

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Do not write below this line - For court use only